

Application Data Sheet

Application Information

Application number::

Filing Date:: 05/19/06

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?: Paper

Computer Readable Form (CRF)?:: Yes

Number of copies of CRF:: 1

Title:: ADJUVANTS OF IMMUNE RESPONSE

Attorney Docket Number:: 01948/098003

Request of Early Publication?: No

Request of Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 15

Small Entity?: Yes

Petition Included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type: Inventor

Primary Citizenship Country: US

Status: Full Capacity

Given Name: Dan

Middle Name: H.

Family Name: Barouch

Name Suffix:

City of Residence: Boston

State or Province of Residence: MA

Country of Residence: US

Street of mailing address: 1 Longfellow Place #3222

City of mailing address: Boston

State or Province of mailing address: MA

Country of mailing address:

Postal or Zip Code of mailing address: 02114

Applicant Authority Type: Inventor

Primary Citizenship Country: US

Status: Full Capacity

Given Name: Shawn

Middle Name: M.

Family Name: Sumida

Name Suffix::

City of Residence:: Honolulu

State or Province of Residence:: HI

Country of Residence:: US

Street of mailing address:: 7122 Kamilo Street

City of mailing address:: Honolulu

State or Province of mailing address:: HI

Country of mailing address::

Postal or Zip Code of mailing address:: 96825

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Norman

Middle Name:: L.

Family Name:: Letvin

City of Residence:: Newton

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 36 Brackett Road

City of mailing address:: Newton

State or Province of mailing address:: MA

Country of mailing address::

Postal or Zip Code of mailing address:: 02458

Correspondence Information

Correspondence Customer Number:: 21559

Representative Information

Representative Customer Number:: 21559

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National stage of	PCT/US2004/038865	11/19/04

PCT/US2004/038865	An application claiming	60/523,380	11/19/03
	the benefit under 35 USC		
	119(e)		

Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State of Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::